| | 1 | Application or Docket Number | | | | | | |
|--|----------------------|---------------------------------|------------------|-----------------------|------------------------|-----------------|----------------------------|------------------------|
| PATENT APPLICATION | ND CIF | 09855904 | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | SMALI | SMALL ENTITY TYPE COR | | | OTHER THAN SMALL ENTITY | |
| TOTAL CLAIMS | | | | RAT | E FEE | 7 | RATE | FEE |
| FOR | NUMBER FILED NUM | | ER EXTRA | BASIC | FEE 355.0 | o _{OR} | BASIC FEE | · 710.00 |
| TOTAL CHARGEABLE CLAIMS | 4 minus 20= 1 | | | X8 9 | _ | OR | X\$18= | |
| INDEPENDENT CLAIMS | / minus 3 = | | 9 | . X40 | _ | OR | X80= | |
| MULTIPLE DEPENDENT CLAIM PRESENT | | | +135 | ; <u> </u> | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter "0" in column 2 | | | | TOTA | 1 | OR | TOTAL | 710 |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3) | | | | SMA | LLENTITY | OR | OTHER SMALL | THAN |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent | HIGH NUM PREVI | HEST MBER NOUSLY OFOR | PRESENT EXTRA | RAT | ADDI TIONA FEE | T | RATE | ADDI- TIONAL FEE |
| Total · 4 | Minus -2 | 0 | = | X\$ 9 |)= | OR | X\$18= | |
| Independent • / | Minus | <u>ろ</u> | | X40 | - | OR | X80= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | +135 | i= | OR | +270= | |
| 926/06 RCE (Column 1) (Column 2) (Column 2) | | | | ADDIT. | FEE | | YOTAL ADDIT, FEE | |
| (Condition of Condition of Cond | | | | | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent CLAIMS REMAINING AFTER AMENDMENT - L | NUA PREVI | MBER NOUSLY D FOR | PRESENT EXTRA | RAT | ADDI E TIONA FEE | M. | RATE | ADDI- TIONAL FEE |
| Total • Z/ | Minus •• | | 9 | X\$ 9 | <u> </u> | OR | X\$18= | |
| Independent • FIRST PRESENTATION OF M | Minus MINUS | T CLAIM | - | X 40 | = | OR | X80= | |
| | | - | | +135 | j= | OR | +270= | |
| | | | | TO ADDIT. | TAL FEE | OR | TOTAL ADDIT, FEE | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | |
| CLAIMS REMAINING AFTER AMENDMENT Total Independent Total | NUA PREVI | HEST MBER HOUSLY D FOR | PRESENT EXTRA | RAT | E TIONA FEE | L | RATE | ADDI- TIONAL FEE |
| Total | Minus •• | | • | X\$ 9 | | OR | X\$18= | |
| Independent • | Minus ••• | | = | X40 | | _ | X80= | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | | |
| " If the entry in column 1 is less than the entry in column 2 write "T" in column 3. | | | | | | OR | +270= | |
| "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEEOR ADDIT. FEE | | | | | | | | |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | |